Application	or Docket	Number
T T P III C C II C I I	OI DOCKEL	TAUTHORN

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I						(SMALL E	NTITY		OTHER	THAN	
			(Column 1)		(Column 2)		1 .	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS		58					RATE	FEE]	RATE	. FEE	
FOR			NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			S 8 min	minus 20= *		?		X\$ 9=	342	OR	X\$18=	
INDEPENDENT CLAIMS			9 m	ninus 3 =			X43=		OR	X86= ·		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=	,	OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						ı	TOTAL	. ** .	OR	TOTAL		
	· c	LAIMS AS A	MENDE	- PART	. 11		OTHER THAN					THAN
(Column 1) (Column 2) (Column 2)				(Column 3)		SMALL	ENTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		-		X43=		OR	X86=	
L	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT (CLAIM			+145=	-	OR	+290=	
		12127	Visa	TV +7 -	C		L	TOTAL			TOTAL	
		(Column 1)	8 \$1 50,	(Columi		(Column 3)	A	VDDIT. FEE			ADDIT. FEE	
		CLAIMS	1	HIGHE	ST	(Column 3)	ı		ADDI-	1 1		ADDI-
	-	REMAINING AFTER		NUMBE PREVIOU		PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
ME		AMENDMENT		PAID FO	OR		-		FEE			FEE
QN	Total	*	Minus	**		=	L	X\$ 9=		OR	X\$18=	
AMENDMENT B	Independent	*	Minus	SENIDENT C	N AIM	=		X43=	•	OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						' [+145=		OR	+290=		
					A	TOTAL DDIT, FEE	·	OR	TOTAL ODIT. FEE			
	•	(Column 1)		(Column	n·2) .	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	· ·	Minus	***	·	=		X43=		OR	X86=	
	FIRȘT PRESE	NTATION OF MU	LTIPLE DEP	ENDENT C	LAIM		-			⁰	-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The *Highest Num	ber Previously Paid	For (Total or	Independent) is the	highest number	foun	d in the app	ropriate box	in colu	mn 1.	